FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000056127 (1)

1. Corporate Name
MY IDEA, INC.

Principal Place of Business:
8484 N.W. 47TH DR.
CORAL SPRINGS FL 33067

Mailing Address:
8484 N.W. 47TH DR.
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/28/1994

3a. Date of Last Report

2. Principal Place of Business (21)

2a. Mailing Address (26)

4. FEI Number: 65 0508525 — Applied For / Not Applicable

Suite Apt. # (22) — Suite Apt. # (27)

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City, State (23) — City & State (28)

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip (24) Country (25) Zip (29) Country (30)

8. The corporation has elected to be taxed under S. 1991 of Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

Signature

12. OFFICERS AND DIRECTORS

Title	Name	Address
DP	HUFF, MARIANNE	8484 N.W. 47TH DR. CORAL SPRINGS FL 33067
DV	HUFF, JAMIE	8484 N.W. 47TH DR. CORAL SPRINGS FL 33067

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN (12)

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information contained on the annual report or supplemental annual report is true and accurate and that my signature shall constitute the oath required by Section 607.0202, Florida Statutes, and that my name appears in Block 12 or Block 13 hereof as an officer or director with an address.

SIGNATURE: Marianne Huff MARIANNE HUFF 4/29/95 305-346 8552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0110371 CP